

SCC eFile	2014 ANNUAL REPORT COMMONWEALTH OF VIRGINIA STATE CORPORATION COMMISSION	214525033						
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <p>1.) CORPORATION NAME: CONSUMER PORTFOLIO SERVICES, INC.</p> <p>2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: CT CORPORATION SYSTEM 4701 COX ROAD, SUITE 285 GLEN ALLEN, VA</p> <p>3.) CITY OR COUNTY OF VA REGISTERED OFFICE: HENRICO COUNTY</p> <p>4.) STATE OR COUNTRY OF INCORPORATION: CA</p> </div> <div style="width: 35%;"> <p>DUE DATE: 6/30/2014</p> <p>SCC ID NO: F1179664</p> <p>5.) STOCK INFORMATION</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="width: 50%;">CLASS</th> <th style="width: 50%;">AUTHORIZED</th> </tr> <tr> <td>COMMON</td> <td>75,000,000</td> </tr> <tr> <td>PREFER</td> <td>10,000,000</td> </tr> </table> </div> </div>			CLASS	AUTHORIZED	COMMON	75,000,000	PREFER	10,000,000
CLASS	AUTHORIZED							
COMMON	75,000,000							
PREFER	10,000,000							
<p>6.) PRINCIPAL OFFICE ADDRESS:</p> <p style="margin-left: 40px;">ADDRESS: 19500 Jamboree Road</p> <p style="margin-left: 40px;">CITY/ST/ZIP: Irvine, CA 92612</p>								
<p>7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.</p>								
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; vertical-align: top;"> NAME: CHARLES E. BRADLEY, JR. TITLE: PRESIDENT ADDRESS: 3800 Howard Hughes Pkwy 14th Floor CITY/ST/ZIP/CO: Las Vegas, NV 89169 </td> <td style="width: 5%; text-align: center; vertical-align: middle;"> <input checked="" type="checkbox"/> </td> <td style="width: 40%; text-align: center; vertical-align: middle;"> OFFICER <input checked="" type="checkbox"/> DIRECTOR </td> </tr> </table>			NAME: CHARLES E. BRADLEY, JR. TITLE: PRESIDENT ADDRESS: 3800 Howard Hughes Pkwy 14th Floor CITY/ST/ZIP/CO: Las Vegas, NV 89169	<input checked="" type="checkbox"/>	OFFICER <input checked="" type="checkbox"/> DIRECTOR			
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NAME:	ROBERT E RIEDL	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	EVP & COO		
ADDRESS:	19500 JAMBOREE ROAD		
CITY/ST/ZIP/CO:	IRVINE, CA 92612		
NAME:	TERI ROBINSON	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	SR VP		
ADDRESS:	3800 Howard Hughes Pkwy		
CITY/ST/ZIP/CO:	14th Floor Las Vegas, NV 89169		
NAME:	CHRIS TERRY	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	SR VP		
ADDRESS:	19500 JAMBOREE ROAD		
CITY/ST/ZIP/CO:	IRVINE, CA 92612		
NAME:	CHRIS ADAMS	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	523 LLOYD		
CITY/ST/ZIP/CO:	LATROBE, PA 15650		
NAME:	BRIAN RAYHILL	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	6 PLEASANT STREET		
CITY/ST/ZIP/CO:	DARIEN, CT 06820		
NAME:	WILLIAM B. ROBERTS	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	126 EAST 56TH STREET		
CITY/ST/ZIP/CO:	NEW YORK, NY 10022		
NAME:	GREG WASHER	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	3187 PULLMAN STREET		
CITY/ST/ZIP/CO:	COSTA MESA, CA 92626		
NAME:	DANIEL S. WOOD	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	600 DEPOT ST.		
CITY/ST/ZIP/CO:	LATROBE, PA 15650		
NAME:	Laurie Straten	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	3800 Howard Hughes Pkwy		
CITY/ST/ZIP/CO:	14th Floor Las Vegas, NV 89169		
NAME:	Rick Haskell	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	19500 Jamboree Road		
CITY/ST/ZIP/CO:	Irvine, CA 89169		
I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.			
/s/ MICHAEL T. LAVIN	MICHAEL T. LAVIN, EVP & CLO	5/13/2014	
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	PRINTED NAME AND CORPORATE TITLE	DATE	

It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.